## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or <u>Fax</u> (571) 273-2885							
the current corresponde address; and/or (b) indic	priate. All further corresponce address as indicated ucating a separate "FEE AI	ondence inclu Inless correcto DDRESS" for	iding the Pate ed below or d maintenance	EE and PUBLICATION I ent, advance orders and n directed otherwise in Bloom e fee notifications.	FEE (if required). Blocks I obtification of maintenance ck I, by (a) specifying a new	through 4 should be fees will be mailed to w correspondence	
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  69713 7590 October 8, 2010				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Occhiuti Rohlicek & Tsao LLP  10 Fawcett Street  Combridge MA 02138				Certify I hereby certify that t United States Postal s in an envelope addres or being facsimile tra below.	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
Cambridge, MA 02138					(Depositor's name)		
					(Signature)		
					(Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED IN		O INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/581,759	July 26, 2007	ARDYTHE L. MO		. MORROW	50051-002US1	6591	
TITLE OF INVENTION: OLIGOSACCHARIDE COMPOSITIONS AND USE THEREOF IN THE TREATMENT OF INFECTION							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
Nonprovisional	NO	\$1510		\$300	\$1810	January 10, 2011	
EXAMINER Leigh C. Maier		ART UNIT 1623		CLASS-SUBCLASS 514-062000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  [ ] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  [ ] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE; Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY)  CHILDREN'S HOSPITAL MEDICAL CENTER CINCINNATI, OHIO							
INSTITUTO NACIONAL DE CIENCIAS MEDICAS Y NUTRICION MEXICO, D.F., MEXICO							
UNIVERSITY OF MASSACHUSETTS BOSTON, MASSACHUSETTS							
Please check the appropriate assignee category or categories (will not be printed on the patent): [ ] individual [X] corporation or other private group entity [ ] government							
4a. The following fee(s) are enclosed:  [X] Issue Fee [X] Publication Fee (No small entity discount permitted)  [] Advance Order - # of Copies							
5. Change in Entity Status (from status indicated above)  [] la. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7. [] lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or, or the assignee or other party in interest as shown by the records of the Untied States Patent and Trademark Office.							
(Authorized Signature) 1. Rochy Jean (I				(Date)	3 - 11		
Typed or Printed Name Y. Rocky Tsao, Ph.D., J.D. Registration No. 34,053							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.